Health Cover to Senior Citizens in Rural Areas

*143. SHRI SOLIPETA RAMA CHANDRA REDDY:
DR. D. VENKATESHWAR RAO:†

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government would consider extending full health cover to senior citizens in rural areas;

(b) if so, whether any proposal has been formulated; and

(c) if so, the details of proposals formulated in this regard?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI DALIT EZHILMALAI): (a) to (c) While there is no scheme of the Ministry specifically for providing medical cover to senior citizens in rural areas, primary health care facilities through Primary health Centres and Community Health Centres are available to all the citizens of the country, including senior citizens in rural areas. Specialist medical facilities are available in Sub-District Hospitals, District Hospitals and Medical College Hospitals. Health needs of ageing people are also being addressed through the National Health Schemes, especially the National Programme for Control of Blindness, under which mostly old people are the beneficiaries. In addition, citizens can avail themselves of various medical insurance schemes available through the insurance companies.

DR. D. VENKATESWAR RAO: Question No. 143, Sir.

SHRI DALIT EZHILMALAI: Sir, while there is no scheme of the Ministry, specifically for providing medical cover to senior citizens in rural areas, primary health care facilities, through Primary Health Centres and Community Health Centres, are available to all-citizens of the country, including senior citizens in rural areas. Specialist medical facilities are available in Sub-District Hospitals, District Hospitals and Medical College Hospitals. Health needs of ageing people are also being addressed through the National Health Schemes, especially the National Programme for Control of Blindness, under which mostly old people are the beneficiaries. In addition, citizens can avail themselves of various medical insurance schemes available through insurance companies.

DR. D. VENKATESHWAR RAO: Mr. Chairman, Sir, my question is regarding the senior citizens in rural areas. The answer which the Minister gave is about the facilities available in the rural areas of our country. Now, I would like to bring to the notice of the Minister the matter regarding the functioning of primary Health Centres which are catering to the needs of the citizens of the rural areas mostly. What are the funds available for those Primary Helath Centres? Primary Health Centres were established all over the country. The staff pattern is like this, doctors, nurses, pharmacists, laboratory assistants, watchmen etc. So, how much is the salary component and how much is the amount that is being catered for medicines, treatment, etc?

SHRI DALIT EZHILMALAI: Sir, basically these Primary Health Centres are manned, managed and administered by the respective State Governments.

DR. D. VENKATESHWAR RAO: Sir, the fact lies like this. The amount that is incurred for salaries is roughly Rs. 2.25 lakhs, whereas the amount that has been given for medicines and treatment, etc. is Rs. 10,000 to 30,000. This amount of Rs. 10,000 to 30,000 is equivalent to the salary of a single individual in the Primary Health Centre. Taking this fact into Consideration, will the Government give any direction or suggest any alternative to bring real health care to the

†The question was actually asked on the floor of the House by Dr. D. Venkateshwar Rao.

needy citizens because Rs. $2V_2$ lakhs are required for salaries and only 10 to 30 thousand rupees is the maximum amount that has been sanctioned to a Primary Health Centre for a year. This is what is happening at the Primary Health Centre level.

SHRI DALIT EZHILMALAI: I have already said that this is an adminsitrative problem of the State Government. And if the hon. Member wants any more details, we will ask the State Governments to provide them and then send the information to the hon. Members.

श्री नरेन्द्र मोहन : माननीय सभापति जी, यह इतना गंभीर मामला है और इसको बड़ी सरलता से सरकार निपटा देना चाहती है। मेरी समझ में यह बात बिल्कुल नहीं आ रही है कि प्राथमिक स्वास्थ्य केन्द्र और सामुदायिक स्वास्थ्य केन्द्र जो हैं, उनकी जितनी दुर्दशा ग्रामीण क्षेत्रों में हैं, इसके बारे में भारत सरकार पूरी तरह से उदासीन हैं। यही नहीं, स्वास्थ्य मंत्रालय की स्थायी समिति ने भी इसकी चर्चा की है। वहां पर डाक्टर सामान्यतः रहते ही नहीं है और औषधियां बिल्कुल नगणय हैं। वहां पर स्प्रिट और काटन भी उपलब्ध नहीं होता। औषधियो पर कितना खर्चा होता है यह भगवान जाने। लेकिन जो भी खर्चा होता है वह भ्रष्टाचार में चला जाता है। यह देहाती क्षेत्रों में, ग्रामीण क्षेत्रों में स्वास्थ्य केन्द्रों की दशा है। मैं माननीय मंत्री जी से जानना चाहता हूं कि इनके अन्तर्गत जो भी प्राथमिक स्वास्थ्य केन्द्रो पर कितने मरीज आते हैं और उनके इलाज के लिए कितने धन की व्यवस्था राज्य सरकार करती है और कितनी केन्द्र सरकार करती है? इसी प्रकार से सामुदायिक स्वास्थ्य केन्द्रों की क्या स्थिति है इसके बारे में भी आप स्पष्ट करें ?

SHRI DALIT EZHILMALAI: Sir, we have noted the suggestions given by the hon. Member. To make the Primary Health Centres, now administered by the State Governments, to be more effective and helpful to the people in the rural areas, we will take suitable action and take up the matter with the State Governments

श्री नरेन्द्र मोहन : मैंने यह चाहा ही नहीं। मैं तो जानना चाहता हूं कि कितना धन खर्च कर रही है केन्द्रीय सरकार प्राइमरी हेल्थ सेंटर्ज पर और कम्युनिटी हेल्थ सेंटर्ज पर ?

wish to know from the Minister how much money the Government of India is spending on the Primary Health Centres and Community Health Centres, and how many patients are going to these Centres on an average every year.

SHRI DALIT EZHILMALAI: Sir, the Central Government as on date does not administer any Primary Health Centre in the rural areas.

SHRI SOLIPETA RAMACHANDRA REDDY: Sir, pardon me. I was a little late. In fact, my name was in the beginning itself.

I want to know this from the hon. Minister. Diseases like cholera, typhoid and hepatitis are claiming the maximum number of lives of senior citizens in the rural areas. What steps are proposed to be taken to assist the senior citizens residing in the rural areas as still no treatment is available in the Primary health Centres?

Secondly, will the hon. Minister consider providing Ayurvedic and Homoeopathic medicines also in the Prime Health Centres.

SHRI DALIT EZHILMALAI: Sir, I completely agree with the hon. Member that communicable diseases like malaria, leprosy and other diseases are rampant. Generally, the Government offers the remedial treatment to these people. There is an insurance cover particularly with regard to senior citizens. We have noted the degenerative disorder and senility and all these things, and we are considering them.

With regard to the second part of the question, we will take note of the suggestions made by the hon. Minister. We will take suitable action so that

health care reaches senior citizens in the rural areas.

SHRI S.B. CHAVAN: Hon. Chairman, Sir, the hon. Minister is coming from a rural area. I hope he knows the condition of the Primary Health Centres in the rural areas, what type of medicines are available therein, how many doctors are there and how many nurses are working in the Primary Health Centres. Mostly the staff is deputed to big cities, and no staff is available in the rural areas. Medicines are just not available in the Rural Health Centres.

The scheme was started by the Government of India, and later on, after the completion of the Plan period, it was transferred to the State Governments. It does not mean that the Central Government has totally washed of its hands and that it is not responsible for what happens in those areas. Looking to the conditions prevailing in the Primary Health Centres and Sub-Centres, I think, the Government of India will have to provide something extra in order to see that the Primary Health Centres serve the purpose for which they were established. You have got to visit some of these Centres, and you will come to know the condition of the Primary Health Centres.

SHRI DALIT EZHILMALAI: Thanks for the suggestions given by the hon. Member. I myself come from a village. I know very well how the Primary Health Centres actually function in the rural areas. Really I completely agree with the statement of the hon. Member. We will certainly visit some of the Centres in the rural villages. I do not say that by transferring or giving over these responsibilities to the State Governments, the Central Government has washed of its hands. We have certainly got the responsibility, and we will look into this mater.

SHRI J. CHITHARANJAN: Sir, in the written answer it has been stated:

> "While there is no scheme of the Ministry especially for providing medical cover to senior citizens in the rural areas, primary health care facilities through Primary Health Centres and Community Health Centres are available to all the citizens of the country, including senior citizens."

Sir, as far as I know, in all the places all over India, the Primary Health Centres and the Community Health Centres have not been started on the basis of the- criteria laid down. It is related to the volume of population, community health centre for a certain set of population and a primary health centre for another set of population. But on that basis primary health centres and community health centres have not been started in several places in India. Therefore, my first question is: What measures does the Government propose to take to start primary health and community health centres on the basis of the above criteria in those areas where they have not been started?

Number two, of course, the State Governments are managing health care to the people. But, at the same time, the services rendered by them to the people are very poor and adequate medicines are not available and there are several other dis-advantages. Will the Central Government consider helping the State Government to improve the functioning of the primary health centres and the community health centres?

SHRI DALIT EZHILMALAI: Mr. Chairman, Sir, if the community health centres have not been started in certain areas in the rural country, we will study the situation and accordingly we will work out a plan to start the same. We will suggest to the State Governments to initiate action in that direction.

The criteria under which these community health centres and primary health centres have to be started, we will certainly look into that. In a way to help the State Governments to take health care facilities to the rural country, we will study the present situation and accordingly

we will work out a programme in consultation with the State Governments. For such a programme we have really initiated certain action to convene a meeting of Health Ministers from all the States. We will offer certain programmes to take. Health care to the rural country.

प्रो0 रामबख्श सिंह वर्मा : मान्यवर सभापति जी, बहुत बहुत धन्यवाद। मान्यवर, जो यह माननीय मंत्री जी ने उत्तर दिया है इसका जो "ए" पार्ट हैं-— "Whether Government would consider extending full health cover to senior citizens in rural areas;"

इसका उत्तर माननीय मंत्री जी ने नहीं दिया है। परंतु माननीय मंत्री जी ने यह बताने की कोशिश की है कि इस देश में नागरिक जिनमें सीनियर सिटीजन्स भी शामिल है, उनको कौन-कौन सी फैसिलिटीज उपलब्ध है। जबकि माननीय मंत्री जी ने अपने उत्तर में स्वंय बतलाया हैकि इस देश में जो प्रायमरी हेल्थ सेंटर्स है, जो कंम्युनिटी हेल्थ सेंटर्स हैं, उनकी क्या स्थिति हैं। तो मैं पुनः माननीय मंत्री जी से पूछना चाहूंगा कि सीनियर सिटीजन्स जो हैं, क्या उनको फुल मेडिकल हेल्थ कवर देने का सरकार का विचार है? उसके साथ साथ जो उत्तर में लास्ट में माननीय मंत्री जी ने कहा है — "In addition, citizens can avail themselves of various medical insurance schemes available through the insurance companies." माननीय मंत्री जी से मैं पूछना चाहता हूं कि वे कौन-कौन सी इंश्योरेंस कम्पनीज है जिनके माध्यम से इस तरह से मेडिकल इंश्योरेस स्कीम चल रही है, जिनका फायदा उठाया जा रहा है। ये दो हमारे प्रश्न हैं माननीय मंत्री जी से।

SHRI DALIT EZHILMALAI: Mr. Chairman, Sir, my Ministry, our Government very much want to provide to senior citizens health cover which is available in other sectors also. But the fact is that medical health care, as on date, is still a far cry to many of our rural people in several places. We have noted that point also.

I am pointing out to the hon. Member about the actual position as on date. I very much agree with the hon. Member that our senior citizens should be extended adequate and necessary health cover. He asked about the schemes that are available to the senior citizens in the rural areas of the country. One is the Jana Arogya Scheme. This is one of the insurance schemes. The other is the Mediclaim Insurance Scheme. These two schemes are available to the senior citizens.

144. [The Questioner (Shri Shiv Charan Singh) was absent for answer vide Col... in Fara]

Working of Sahitya Akademi and Sangect Natak Akademi

*145. SHRI ASHOK MITRA: Will the Minister of HUMAN RESOURCE DEVELOPMENT be pleased to state:

(a) the details of the specific recommendations of the P.N. Haskar Committee appointed to enquire into the affairs of the Lalit Kala Akademi that have been accepted;

(b) the recommendations that have been rejected and the reasons therefor; and

(c) whether it is proposed to appoint similar committees to review the working of the Sahitya Akademi and the Sangeet Natak Akademi?

THE MINISTER OF HUMAN RESOURCE DEVELOPMENT (DR. MURLI MANOHAR JOSHI): (a) and (b) A Statement is laid on the table of the house *(See below).*

(c) The Haskar Committee had reviewed working of the Sahitya Akademi and Sangeet Natak Akademi as well. There is no proposal to appoint another Committee.

Statement

(a) Part 'A' — attached gives the list of Haskar Committee Recommendations in respect of Lalit Kala Akademi which were accepted.

(b) Part 'B' — attached gives the Haskar Committee Recommendation in respect of Lalit Kala Akademi which was not accepted.